

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL	32	8-2-01
O.I.P.E. CLASSIFIER	HL	32	8/8
FORMALITY REVIEW	HL	1079	09/03/02
RESPONSE FORMALITY REVIEW	HL	712	03/19/02

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	5/13/04
2	7/26/04
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	=
14	-
15	-
16	-
17	✓
18	✓
19	-
20	-
21	-
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24	-
25	-
26	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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929  
03/13/02

574  
9/24